ENTRY BLAN	К		
PLEASE TYPI	E OR PRINT	Entered pre	vious May Show
		☑ yes	no no
☐ Ms.	CHRISTOPHE		•
IVII. AITIST	CTIR! - H	1,0,00	(Last Name Last)
Permanent 4	83 AQUEDI	UCT ST.	AKRON
	Street		City
44303	Tel. (216	, 864-91	76
Zip	Area Code		
Temporary or			
Studio Addres	SStreet		City
	Tel. ()	
Zip	Area Code		
	oresently live in ve, which county		
Collaborator _			
	(If Any)		
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	pick up at Muse		
	nould dispose of nould ship to art		is address:
	-	100 0.0.D. uc til	io address.
	vin /	ny	
Special Instruc	tions		
When necessar	y include below	instructions or	a drawing of
how the object	t is to be assemb	led and display	ed.
entry blanks w	ik must be fully	ed.	igned. Unsigned
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Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until May 18, 1980.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Kustopher Meyer

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2 □ 1. Paintings □ 2. Graphics □ 3. Photography □ 4. Sculpture □ 5. Electric □ 6. Crafts						
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Title						
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1980 MAY SHOW The Cleveland Museum of Art Cleveland, Ohio 44106

CHRISTOPHER ME	VER
Name	
483 AQUEDUCT	ST.
Address	
AKRON OHIO	44303
City & State	Zip

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NOTIF	ICATION #2				DO NOT DETACH
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THE DEATH OF M	ARAT	
DO NOT WRITE IN THIS SECTION	ACCEPTED	REJECTED
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This is your only receipt to claim your object(s).

It is understood that the Museum will have the right to dispose for its own account any object not called for by the dates listed.